

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

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Small PHA Plan Update
Annual Plan for Fiscal Year: 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Norton Redevelopment & Housing Authority

PHA Number: VA-015

PHA Fiscal Year Beginning: (04/2001)

PHA Plan Contact Information:

Name: John E. Black

Phone: 540-679-0020

TDD: 540-679-0020

Email (if available): jeblack@compunet.net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspectionat: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

☒ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Contents	<u>Page #</u>
Annual Plan	
i. Table of Contents	1
ii. Annual Plan Information	2
iii. Executive Summary (optional)	2
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	3
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	4
A. Resident Advisory Board Consultation Process	5
B. Statement of Consistency with Consolidated Plan	5
C. Criteria for Substantial Deviations and Significant Amendments	5
Attachments	
<input checked="" type="checkbox"/> Attachment A: Supporting Documents Available for Review	
<input checked="" type="checkbox"/> Attachment B: Capital Fund Program Annual Statement	
<input checked="" type="checkbox"/> Attachment C: Capital Fund Program 5 Year Action Plan	
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input checked="" type="checkbox"/> Attachment E: Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment F: Resident Membership on PHA Board or Governing Body	
<input checked="" type="checkbox"/> Attachment G: Membership of Resident Advisory Board or Boards	
<input type="checkbox"/> Attachment __: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	

Attachment J: Capital Fund Program 5 Year Action Plan– Year 2000 – Revised & Progress Report

ii. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

Streamlined Plan:

- ☐ **High Performing PHA**
☒ **Small Agency (<250 Public Housing Units)**
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

iii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

None

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Authority initiated a Pet Policy and the Policy for the Administration of Community Service and/or Economic Self-Sufficiency Requirements in the FY of 2000

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 414,066

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as **Attachment J**

(2) Capital Fund Program Annual StatementThe Capital Fund Program Annual Statement is provided as **Attachment B****3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No",

skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☒ Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family’s resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☒ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

The Authority has participated in homeownership through VHDA & is currently a teaching agent for the loan application process.

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☒ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA’s estimated or actual (if known) PHDEP grant for the upcoming year?
\$ 49,971
- C. ☒ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. ☒ Yes ☐ No: The PHDEP Plan is attached at **Attachment E**

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (File name)
3. In what manner did the PHA address those comments? (select all that apply)
 - ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included

- ☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment _____.
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.
- ☐ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

- Consolidated Plan jurisdiction: (State of Virginia)
- The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - ☐ Other: (list below)
- PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
- The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan: None

B. Significant Amendment or Modification to the Annual Plan: None

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
YES	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
YES	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
YES	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
NO	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
YES	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
NO	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
YES	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
YES	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
NO	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
YES	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
NO	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
YES	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
YES	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
YES	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NO	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
YES	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NO	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
YES	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
YES	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
YES	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
YES	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

**Annual Statement/Performance
and Evaluation Report**

Part I: Summary

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

ATTACHMENT J

F:\5yr\VA015a01-R

OMB approval No. 2577-0157 (Exp. 7/31/98)

HA Name Norton Redevelopment and Housing Authority				Capital Fund Number VA36P01550100	FFY of Grant Approval 2000
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number 01 <input type="checkbox"/> Final Performance & Evaluation Report <input type="checkbox"/> Performance & Evaluation Report for Program Year Ending ____					
Line #	Summary by Development Accounts	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 20% of line 19)	82,800			
3	1408 Management Improvements	5,000			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost	8,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	15,000			
10	1460 Dwelling Structures	95,885	310,188	310,188	303,213
11	1465.1 Dwelling Equipment-Nonexpendable	122,100	76,878	76,878	76,878
12	1470 Nondwelling Structures	73,000	15,750	15,750	
13	1475 Nondwelling Equipment	12,281	11,250	11,250	
14	1485 Demolition				
15	1490 Replacement Reserves				
16	1495.1 Relocation Costs				
17	1498 Mod Used for Development				
18	1502 Contingency (may not exceed 8% of line 19)				
19	Amount of Annual Grant (Sum of lines 2-18)	414,066	\$414,066	\$414,066	\$380,091
20	Amount of Line 19 related to LBP Activities				
21	Amount of Line 19 related to Section 504 Compliance				
22	Amount of Line 19 related to Security				
23	Amount of Line 19 related to Energy Conservation Measures				
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report					
Signature of Executive Director and Date X				Signature of Public Housing Director/Office of Native American Programs Administrator and Date X	

**Annual Statement/Performance
and Evaluation Report
Part II: Supporting Pages**

**U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing**

Capital Fund Program # VA36P01550100

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<u>HA-Wide</u> Operations	A. General Operations Subtotal	1406	100%	82,800 82,800	- -	- -	- -	
<u>HA-Wide</u> Mgt. Improvements	A. Update office equipment Subtotal	1408	100%	5,000 5,000	- -	- -	- -	
<u>HA-Wide</u>	A. Landscaping & Tree Trimming	1450	100%	5,000	-			
	B. A/E fees and costs	1430	LS	8,000	-			
	Subtotal			13,000	-	-	-	
<u>HA-Wide</u>	A. Replacement Refrigerators	1465.1	LS	35,500	28,446	28,446	\$28,446	
	B. Replacement Ranges	1465.1	LS	25,000	-	-		
	C. Replacement Heatpumps	1465.1	LS	8,000	-	-		
	D. Replacement DHW Heaters	1465.1	LS	1,500				
	E. Replacement Range Hoods	1465.1	LS	600				
	Subtotal			70,600	28,446	28,446	28,446	
<u>VA 15-01</u>	A. Replacement Radiant Heaters	1465.1	LS	1,500	-	-		
	B. Remove Old Chimneys	1460	LS	7,000	6,975	6,975		
	C. Build Porches & Storage	1470	LS	52,000	15,750	15,750		
	D. Repave Driveways	1450	LS	10,000	-	-		
	E. Install Heat pump	1465.1	LS	50,000	48,432	48,432	48,432	
	F. Remodel Bathrooms	1460	LS	-	290,598	290,598	290,598	
	Subtotal			120,500	361,755	361,755	339,030	

(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance & Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Program Administrator and Date

**Annual Statement/Performance
and Evaluation Report**

Part II: Supporting Pages

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
VA 15-04	A. Install Monitoring System	1475	LS	12,281	11,250	11,250		
	B. Replace Carpet	1460	LS	3,500	2,310	2,310	2,310	
	C. Replace Window Blinds	1460	LS	12,000	10,305	10,305	10,305	
	D. Replace Trap Primers	1460	LS	1,500	-	-	-	
	E. Replace Kitchen Faucets	1460	LS	2,000	-	-	-	
	F. Install Hall Lighting	1460	LS	10,000	-	-	-	
	G. Enclose Storage Area	1470	LS	21,000	-	-	-	
	H. Replace Wallpaper Hallways	1460	LS	59,885	-	-	-	
	Subtotal			122,166	23,865	23,865	12,615	
	Grand Total			414,066	414,066	414,066	380,091	
<div> <div>(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement</div> <div>(2) To be completed for the Performance & Evaluation Report</div> </div>								
Signature of Executive Director and Date					Signature of Public Housing Director/Office of Native American Program Administrator and Date			

**Annual Statement/Performance
and Evaluation Report**
Part III: Implementation Schedule
Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
HA Wide Activities							
<u>HA Wide</u>	3/31/02			9/30/03			
<u>VA 15-01</u>	3/31/02			9/30/03			
<u>VA 15-04</u>	3/31/02			9/30/03			
<div style="display: flex; justify-content: space-between;"> (1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report </div>							
Signature of the Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

**Annual Statement/Performance
and Evaluation Report**

Part I: Summary

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

ATTACHMENT

F:\5yr\va015b02

OMB approval No. 2577-0157 (Exp. 7/31/98)

HA Name Norton Redevelopment and Housing Authority				Capital Fund Number VA36P01550100	FFY of Grant Award 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement <input type="checkbox"/> Final Performance & Evaluation Report <input type="checkbox"/> Performance & Evaluation Report for Program Year Ending					
Line #	Summary by Development Account	Total Estimated Cost Original	Revised (1)	Total Actual Cost (2) Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 2	82,800			
3	1408 Management Improvements	7,000			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost				
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000			
10	1460 Dwelling Structures	205,666			
11	1465.1 Dwelling Equipment-Nonexpe	18,100			
12	1470 Nondwelling Structures	85,500			
13	1475 Nondwelling Equipment	10,000			
14	1485 Demolition				
15	1490 Replacement Reserves				
16	1495.1 Relocation Costs				
17	1498 Mod Used for Development				
18	1502 Contingency (may not exceed 8% of line 19)				
19	Amount of Annual Grant (Sum of line	414,066			
20	Amount of Line 19 related to LBP Activities				
21	Amount of Line 19 related to Section 504 Compliance				
22	Amount of Line 19 related to Security				
23	Amount of Line 19 related to Energy Conservation Measures				
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report					
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs		
X			X		

**Annual Statement/Performance
and Evaluation Report**

Part II: Supporting Pages

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds obligated (3)	Funds expended (4)	
HA-Wide Operations	A. General Operations Subtotal	1406	100%	82,800 82,800				
HA-Wide Mgt. Improvements	A. Update office equipment Subtotal	1408	100%	7,000 7,000				
HA-Wide	A. Landscaping & Tree Trimming	1450	100%	5,000				
	B. A/E fees and costs	1430	LS	-				
	Subtotal			5,000				
HA-Wide	A. Replacement Radiant Heating	1465.1	LS	1,500				
	B. Replacement Refrigerator	1465.1	LS	2,000				
	C. Replacement Ranges	1465.1	LS	1,000				
	D. Replacement Heatpumps	1465.1	LS	8,000				
	E. Replacement Water Heating	1465.1	LS	5,000				
	F. Replacement Range Hood	1465.1	LS	600				
	Subtotal			18,100				
VA 15-01	A. Build Porches & Storage	1470	LS	#####				
	B. Install Heatpumps	1460	LS	30,000				
	C. Repave drive ways	1450	LS	20,000				
	Subtotal			#####				
VA 15-04	A. Replace trap primers	1460	LS	1,500				
	B. Replace kitchen sink faucet	1460	LS	9,000				
	C. Ceiling tiles - Hallways	1460	LS	5,000				
	D. Wallpaper Hallways	1460	LS	36,000				
	Subtotal			51,500				
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement				(2) To be completed for the Performance & Evaluation Report				
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs				

**Annual Statement/Performance
and Evaluation Report**

Part II: Supporting Pages

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (1)	Funds Expended (1)	
VA 15-01	A. Design & Build Porches	1470	LS	50,000				
Head Start Bd	B. New Drive Way	1470	LS	15,000				
	C. Replace Roof	1470	LS	2,500				
	D. Replacement Windows	1470	LS	3,000				
	E. Install Heatpump	1475	LS	10,000				
	Subtotal			80,500				
VA 15-06	A. Design & Build Porches	1470	LS	15,000				
	Subtotal			15,000				
	Grand Total			#####				
<div style="display: flex; justify-content: space-between;"> (1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report </div> <div style="display: flex; justify-content: space-between;"> Signature of Executive Director and Date Signature of Public Housing Director/Office of Native American Programs </div>								

**Annual Statement/Performance
and Evaluation Report**

Part III: Implementation Schedule

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name	Funds Obligated (Quarter Ending)			Funds Expended (Quarter Ending Date)			Reasons for Revised Target Date
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
HA Wide	#####			#####			
VA 15-01	#####			#####			
VA 15-04	#####			#####			
<div style="display: flex; justify-content: space-between;"> (1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the </div>							
Signature of the Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs			

**Annual Statement/Performance
and Evaluation Report**

Part I: Summary

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

F:\5yr\VA015a02-R

OMB approval No. 2577-0157 (Exp. 7/31/98)

HA Name Norton Redevelopment and Housing Authority				Capital Fund Number VA36P01550100	FFY of Grant Approval 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number 01 <input type="checkbox"/> Final Performance & Evaluation Report <input type="checkbox"/> Performance & Evaluation Report for Program Year Ending ____					
Line #	Summary by Development Accounts	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 20% of line 19)	82,800			
3	1408 Management Improvements	7,000			
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost				
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000			
10	1460 Dwelling Structures	205,666			
11	1465.1 Dwelling Equipment-Nonexpendable	18,100			
12	1470 Nondwelling Structures	85,500			
13	1475 Nondwelling Equipment	10,000			
14	1485 Demolition				
15	1490 Replacement Reserves				
16	1495.1 Relocation Costs				
17	1498 Mod Used for Development				
18	1502 Contingency (may not exceed 8% of line 19)				
19	Amount of Annual Grant (Sum of lines 2-18)	414,066			
20	Amount of Line 19 related to LBP Activities				
21	Amount of Line 19 related to Section 504 Compliance				
22	Amount of Line 19 related to Security				
23	Amount of Line 19 related to Energy Conservation Measures				
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report					
Signature of Executive Director and Date X				Signature of Public Housing Director/Office of Native American Programs Administrator and Date X	

**Annual Statement/Performance
and Evaluation Report**

Part II: Supporting Pages

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<u>HA-Wide</u>	A. General Operations	1406	100%	82,800				
Operations	Subtotal			82,800				
<u>HA-Wide</u>	A. Update office equipment	1408	100%	7,000				
Mgt. Improvements	Subtotal			7,000				
<u>HA-Wide</u>	A. Landscaping & Tree Trimming	1450	100%	5,000				
	B. A/E fees and costs	1430	LS	-				
	Subtotal			5,000				
<u>HA-Wide</u>	A. Replacement Radiant Heaters	1465.1	LS	1,500				
	B. Replacement Refrigerators	1465.1	LS	2,000				
	C. Replacement Ranges	1465.1	LS	1,000				
	D. Replacement Heatpumps	1465.1	LS	8,000				
	E. Replacement Water Heaters	1465.1	LS	5,000				
	F. Replacement Range Hoods	1465.1	LS	600				
	Subtotal			18,100				
<u>VA 15-01</u>	A. Build Porches & Storage	1470	LS	104,166				
	B. Install Heatpumps	1460	LS	30,000				
	C. Repave drive ways	1450	LS	20,000				
	Subtotal			154,166				
<u>VA 15-04</u>	A. Replace trap primers	1460	LS	1,500				
	B. Replace kitchen sink faucets	1460	LS	9,000				
	C. Ceiling tiles - Hallways	1460	LS	5,000				
	D. Wallpaper Hallways	1460	LS	36,000				
	Subtotal			51,500				
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report								
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Program Administrator and Date				

**Annual Statement/Performance
and Evaluation Report**

Part II: Supporting Pages

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<u>VA 15-01</u> <u>Head Start Bdl.</u>	A. Design & Build Porches	1470	LS	50,000				
	B. New Drive Way	1470	LS	15,000				
	C. Replace Roof	1470	LS	2,500				
	D. Replacement Windows	1470	LS	3,000				
	E. Install Heatpump	1475	LS	10,000				
	Subtotal			80,500				
<u>VA 15-06</u> <u>Head Start Bdl.</u>	A. Design & Build Porches	1470	LS	15,000				
	Subtotal			15,000				
	Grand Total			414,066				
<div> <div>(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement</div> <div>(2) To be completed for the Performance & Evaluation Report</div> </div>								
Signature of Executive Director and Date					Signature of Public Housing Director/Office of Native American Program Administrator and Date			

**Annual Statement/Performance
and Evaluation Report**
Part III: Implementation Schedule
Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
HA Wide Activities							
<u>HA Wide</u>	3/31/03			9/30/04			
<u>VA 15-01</u>	3/31/03			9/30/04			
<u>VA 15-04</u>	3/31/03			9/30/04			
<div style="display: flex; justify-content: space-between;"> (1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement (2) To be completed for the Performance & Evaluation Report </div>							
Signature of the Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

ATTACHMENT C

Five-Year Action Plan

Part I: Summary

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Office of Public and Indian Housing

F:\5yr\VA015c01-R1

HA Name Norton Redevelopment and Housing Authority		Locality (City/County & State) Norton/Wise/Virginia			<input type="checkbox"/> Original <input checked="" type="checkbox"/> Rev. Number 01
A. Development Number/Name	Work Statement for Year 1 FFY: <u>00</u>	Work Statement for Year 2 FFY <u>01</u>	Work Statement for Year 3 FFY <u>02</u>	Work Statement for Year 4 FFY <u>03</u>	Work Statement for Year 5 FFY <u>04</u>
VA 15-01		236,166	188,000	56,500	1,500
VA 15-04		51,500	-	20,000	91,000
VA 15-06		15,000	-	-	101,666
VA 15-03		-	77,666	206,166	91,500
HA Wide Site Improvements		5,000	20,000	5,000	20,000
B. Physical Improvements Subtotal		307,666	285,666	287,666	305,666
C. Management Improvements		7,000	7,000	7,000	7,000
D. HA-Wide Non-dwelling Structures and Equipment		16,600	38,600	36,600	18,600
E. Administration					
F. Other		-	-	-	-
G. Operations		82,800	82,800	82,800	82,800
H. Demolition					
I. Replacement Reserves					
J. Mod Used for Development					
K. Total CGP Funds		414,066	414,066	414,066	414,066
L. Total Non-CGP Funds					
M. Grand Total		414,066	414,066	414,066	414,066
Signature of Executive Director & Date: X		Signature of P.H. Director/Office of Native American Program Admin & Date: X			

Five-Year Action Plan
Part I: Summary (Continuation)
 Capital Fund Program # VA36P01550100

**U.S. Department of Housing
 and Urban Development**
 Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

A. Development Number/Name	Work Statement for Year 1 FFY: <u>00</u>	Work Statement for Year 2 FFY <u>01</u>	Work Statement for Year 3 FFY <u>02</u>	Work Statement for Year 4 FFY <u>03</u>	Work Statement for Year 5 FFY <u>04</u>

Five-Year Action Plan

Part II: Supporting Pages**Physical Needs Work Statement(s)**

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Work Statement for Year 1 FFY: <u>00</u>	Work Statement for Year <u>2</u> FFY: <u>01</u>			Work Statement for Year <u>3</u> FFY: <u>02</u>		
	Development Number/Name General Description	Quantity	Estimated Cost	Development Number/Name General Description	Quantity	Estimated Cost
	Major Work Categories			Major Work Categories		
	<u>HA Wide-Other</u>			<u>HA Wide-Other</u>		
	A. Operations	100%	82,800	A. Operations	100%	82,800
	B. A/E Fees and Costs	100%	-	B. A/E Fees and Costs	100%	
	C. Replacement Office Equipment	LS	7,000	C. Replacement Office Equipment	LS	7,000
	Subtotal		89,800	Subtotal		89,800
	<u>HA Wide Site Improvements</u>			<u>HA Wide Site Improvements</u>		
	A. Landscape	LS	5,000	A. Landscape & Trim Trees	LS	20,000
	B. Tree removal and trim	LS	-	Subtotal		20,000
	Subtotal		5,000			
	<u>HA Wide -Replace Appliances</u>			<u>HA Wide -Replace Appliances</u>		
	A. Refrigerators	LS	2,000	A. Refrigerators	LS	2,000
	B. Ranges	LS	1,000	B. Ranges	LS	1,000
	C. Heat pumps	LS	8,000	C. Heat pumps	LS	8,000
	D. DHW heaters	LS	5,000	D. DHW heaters	LS	5,000
	E. Range hoods	LS	600	E. Range hoods	LS	600
	F. Washers and dryers	LS	-	F. Washers and dryers	LS	2,000
	Subtotal		16,600	Subtotal		18,600
	<u>VA 15-01</u>			<u>VA 15-01</u>		
	A. Replace radiant heaters	LS	1,500	A. Replace radiant heaters	LS	1,500
	B. Build Porches & Storage Area	LS	104,166	B. Build Porches & Storage	LS	156,500
	C. Repave Driveways	LS	20,000	C. Install Window Shutters	LS	30,000
	Subtotal		125,666	Subtotal		188,000
	Subtotal of Estimated Cost		continued	Subtotal of Estimated Cost		continued

Capital Fund Program # VA36P01550100

Office of Public and Indian Housing

form HUD-52834 (10/96)

Page 4 of 6

Work Statement for Year 1 FFY: <u>00</u>	Work Statement for Year <u>2</u> FFY: <u>01</u>			Work Statement for Year <u>3</u> FFY: <u>02</u>					
	Development Number/Name	General Description	Quantity	Estimated Cost	Development Number/Name	General Description	Quantity	Estimated Cost	
	Major Work Categories				Major Work Categories				
	<u>VA 15-01</u>				<u>VA 15-03</u>				
	D. Install New Heatpumps	LS	30,000		A. Install porches and decks	LS	77,666		
	Subtotal		30,000		Subtotal		77,666		
	<u>VA 15-04</u>				<u>VA 15-04</u>				
	A. Replace ceiling tiles in hallways	LS	5,000		A.	LS	-		
	B. Wallpaper hallways	LS	36,000		Subtotal		-		
	C. Replace Trap Primers	LS	1,500						
	D. Replace Sink Faucets	LS	9,000						
	Subtotal		51,500		<u>VA 15-06</u>				
	<u>VA 15-01 - Head Start BDL.</u>				A. Replace Playground Equipment	LS	20,000		
	A. New Drive Way	LS	15,000		Subtotal		20,000		
	B. Install porches and decks (All)	LS	50,000						
	C. Replace Roof	LS	2,500						
	D. Replace Windows	LS	3,000						
	E. Install Heatpump	LS	10,000						
	Subtotal		80,500						
	<u>VA 15-06</u>								
	A. Design & Build Porches	LS	15,000						
	Subtotal		15,000						
	Subtotal of Estimated Cost				414,066	Subtotal of Estimated Cost			

Five-Year Action Plan

Part II: Supporting Pages**Physical Needs Work Statement(s)**

Capital Fund Program # VA36P01550100

**U.S. Department of Housing
and Urban Development**

Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Work Statement for Year 1 FFY: 00	Work Statement for Year <u>4</u> FFY: <u>03</u>			Work Statement for Year <u>5</u> FFY: <u>04</u>		
	Development Number/Name	General Description	Quantity	Estimated Cost	Development Number/Name	General Description
	Major Work Categories				Major Work Categories	
	<u>HA Wide-Other</u>				<u>HA Wide-Other</u>	
	A. Operations		100%	82,800	A. Operations	100%
	B. A/E Fees and Costs		100%	-	B. A/E Fees and Costs	100%
	C. Replacement Office Equipment		LS	7,000	C. Replacement Office Equipment	LS
	D. Replacement Maintenance Vehicle		LS	20,000	D. Replacement Maintenance Vehicle	LS
	Subtotal			109,800	E. Energy Audit	100%
	<u>HA Wide Site Improvements</u>				<u>HA Wide Site Improvements</u>	
	A. Landscape		LS	5,000	Subtotal	
	B. Tree removal and trim		LS	-	89,800	
	Subtotal			5,000	<u>HA Wide -Replace Appliances</u>	
	<u>HA Wide -Replace Appliances</u>				<u>HA Wide -Replace Appliances</u>	
	A. Refrigerators		LS	2,000	A. Refrigerators	LS
	B. Ranges		LS	1,000	B. Ranges	LS
	C. Heat pumps		LS	8,000	C. Heat pumps	LS
	D. DHW heaters		LS	5,000	D. DHW heaters	LS
	E. Range hoods		LS	600	E. Range hoods	LS
	F. Replacement Washers and dryers		LS	-	F. Replacement Washers & Dryers	LS
	Subtotal			16,600	Subtotal	
	Subtotal of Estimated Cost			continued	Subtotal of Estimated Cost	
					continued	

Five-Year Action Plan

Part II: Supporting Pages

Physical Needs Work Statement(s)

Capital Fund Program # VA36P01550100

U.S. Department of Housing
and Urban Development

Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Work Statement for Year 1 FFY: <u>00</u>	Work Statement for Year <u>4</u> FFY: <u>03</u>			Work Statement for Year <u>5</u> FFY: <u>04</u>		
	Development Number/Name General Description	Quantity	Estimated Cost	Development Number/Name General Description	Quantity	Estimated Cost
	Major Work Categories			Major Work Categories		
	<u>VA 15-01</u>			<u>VA 15-01</u>		
	A. Replace radiant heaters	LS	1,500	A. Replace radiant heaters	LS	1,500
	B. Build Porches & Storage Areas	LS	55,000	B. Build Porches & Tenant Storage	LS	-
	C.	LS	-	C.	LS	-
	Subtotal		56,500	D. Replace driveways	LS	-
				Subtotal		1,500
	<u>VA 15-04</u>			<u>VA 15-04</u>		
	A. Install BR Heaters	LS	20,000	A. Install BR heaters	LS	20,000
	B.	LS	-	B. Replace Ventilation System	LS	71,000
	Subtotal		20,000	Subtotal		91,000
	<u>VA 15-06</u>			<u>VA 15-06</u>		
	A. Build porches and decks	LS	-	A. Build porches and decks	LS	101,666
	Subtotal		-	Subtotal		101,666
	<u>VA 15-03</u>			<u>VA 15-03</u>		
	A. Build porches and decks	LS	206,166	A. Build porches and decks	LS	91,500
	Subtotal		206,166	B. Install window shutters		-
				Subtotal		91,500
	Subtotal of Estimated Cost		414,066	Subtotal of Estimated Cost		414,066

form HUD-52834 (10/96)

ref Handbook 7485.3

ATTACHMENT - E

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ 49,971

B. Eligibility type (Indicate with an “x”) N1_____ N2_____ R___X___

C. FFY in which funding is requested 0401-2001

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

The Norton Redevelopment & Housing Authority in conjunction with the City of Norton Police Department, hope that with placing two additional police officers in our Developments and also focusing on our Section 8 units we can make a difference in crime and drug related activities in our community.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
VA 15-1 Ramsey-Southside	50	148
VA 15-3 Pine Hill	27	61
VA 15-4 Regency Towers	90	96
VA 15-6 Hawthorne Acres	51	127

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

12 Months__X__ 18 Months_____ 24 Months_____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1998	65,400	VA36DEP0150198	0	0	11/1998	03-31-01
FY 1999	47,947	VA36DEP0150199	47,565	0	07/2000	03-31-02
FY 2000	49,971	VA36DEP0150100	49,971	0		03-31-03
FY 2001						
FY 2002						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

The Norton Redevelopment & Housing Authority will contract with the local law enforcement agency, Norton Police Department, to employ two additional officers to work exclusively in the housing authority properties, to reduce and/or eliminate drug related and other types of crime from occurring on authority property. The officers will be using a combination of effective patrol methods combined with community policing concepts, such as coordination of efforts with other branches of local law enforcement. The authority will compare data received from the police department crime statistics at the onset of the grant with data received at the end of the grant period to measure the success of the grant.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY 2001 PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	44,971
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	5,000
TOTAL PHDEP FUNDING	49,971

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide

information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for lineitems in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$ 44,971		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1. Hire two additional Police Officers			4-00	4-02	44,971		
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators

1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol			Total PHDEP Funding: \$		
Goal(s)					
Objectives					

Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9170 - Drug Intervention		Total PHDEP Funding: \$
Goal(s)		

Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$ 5,000		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1. Annual Survey			12-00	01-02	5,000		
2.							
3.							

ATTACHMENT - F

Required Attachment: Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: Charles Litton

B. How was the resident board member selected: (select one)?

- ☐ Elected
☒ Appointed

C. The term of appointment is (include the date term expires): 09-12-00 to 01-28--01

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member: 01-28-2001

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

Mayor B. Robert Raines
308 Park Avenue, N.E.
Norton, VA 24273
540-679-2425
Term Expires: 6/30/2004

Vice Mayor William J Mays
PO Box 295
Norton, VA 24273
540-679-7410
Term Expires: 6/30/02

Councilman Jack Wallace
1011 Virginia Avenue, N.E.
Norton, VA 24273
540-679-2020
Term Expires: 6/30/2004

Councilman Joseph Fawbush
420 Oak Avenue
Norton, VA 24273
540-679-0192
Term Expires: 6/30/2002

Councilman Joseph "Huck" Hunnicutt
PO Box 626
Norton, VA 24273
540-679-2002

Required Attachment: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Elsie Miller - Chairperson
247 Virginia Ave.
Norton, VA 24273
540-679-1115

Shelby Delph - Vice-Chairperson
283 Virginia Ave
Norton, VA 24273
540-679-1448

Donna Adams – Secretary
1083 Holly court
Norton, VA 24273
540-679-6540

Marie Corlett
200 6th Street
Norton, VA 24273
540-679-2355

Jodi Cavins
323 Kentucky Ave
Norton, VA 24273

Kenneth Russell
1040 Dogwood Circle
Norton, VA 24273